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CONFIRMATION NO. 7970

<b>SERIAL NUMBER</b> 09/969,459	<b>FILING OR 371(c) DATE</b> 10/02/2001 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 3626	<b>ATTORNEY DOCKET NO.</b> MBT-104-A
<b>APPLICANTS</b> Michael J. McCartney, Richmond Hill, CANADA; <b>** CONTINUING DATA *****</b> <i>None</i> <b>** FOREIGN APPLICATIONS *****</b> <i>None</i> <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 11/01/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Allowance</i> Examiner's Signature <i>Dale E. Campbell</i> Initials <i>DEC</i>		<b>STATE OR COUNTRY</b> CANADA	<b>SHEETS DRAWING</b> 14	<b>TOTAL CLAIMS</b> 20
				<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> AIR MAIL Mr. David J. Greer c/o Ridout & Maybee LLP Suite 2400 One Queen Street East Toronto, ONM5C 3B1 CANADA				
<b>TITLE</b> Health care management method and system				
<b>FILING FEE RECEIVED</b> 370	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	